JUVENILE REHABILITATION ADMINISTRATION (JRA)

DISCHARGE REPORT

DEPARTMENT OF SOCIAL OF HEALTH						
CASE NAME		JRA NUMBER		DATE OF BIRTH		AGE
STREET ADDRESS		CITY	ΓΥ		TE	ZIP CODE
LIVING WITH						
COMMITTING OFFENSE(S)			I EVEL O	F SUPERVISION	J	
			☐ Lev	/el A 📗	Level B Phase II	☐ Level C ☐ Phase III
RELEASE FROM	LENGTH OF SENTENCE	PAROLE OFF	ICER'S NA	AME		
STATUS OF RESTITUTION AND COURT COSTS		LENGTH OF PAROLE	LENGTH OF PAROLE		A	CTUAL DISCHARGE DATE
RESPONSE TO SUPERVISION AND PAROLE CONDITIONS (Include any law violations): Legal:						
· ·						
Parole:						
DISCHARGE CODES:						
WRITTEN BY	DATE	REVIEWED B	Υ			DATE
	DATE	I CONTRACTOR				5/112
Under the authority of RCW 13.40.2	210, discharge from supervis	sion by the J	luvenile	Rehabilitatio	n Adminis	ration is approved.
APPROVED BY						DATE